2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

Feb 24, 2005 08:00 AM Secretary of State DOCUMENT # F65123 1. Entity Name PERRY HOME CENTER, INC. Mailing Address Principal Place of Business ... -3488 US 19 S, 3488 US 19 S. PERRY, FL 32347 PERRY, FL 32347 CR2E034 (10/03) 02182005 No Chq-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 59-2156140 \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent EVERETT, DANNY DO NOT WRITE 103 DOGWOOD LANE PERRY, FL 32347 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ST NAME EVERETT, TONI 103 DOGWOOD LANE STREET ADDRESS . 62414300000 CHTY-ST-ZIP PERRY, FL 11111 12/24/05-80041-013 150.00 NAME EVERETT, DANNY STREET ADDRESS 103 DOGWOOD LANE GITY-ST-ZIP PERRY, FL 00000 HILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED